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<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)		Application No.	09/715,676
		Filing Date	November 17, 2000
		First Named Inventor	Stephen Neushul
		Art Unit	2622
		Examiner Name	Heather D. Gibbs
Total Number of Pages in This Submission	11	Attorney Docket Number	60414P003

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO/SB/08 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; padding: 5px; margin-top: 10px;">Facsimile Cover Sheet</div>
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Thomas M. Coester, Reg. No. 39,637 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	<i>Thomas Coester</i>
Date	June 30, 2005

CERTIFICATE OF MAILING/TRANSMISSION			
I hereby certify that this correspondence is being transmitted via facsimile on the date shown below to the United States Patent and Trademark Office.			
Typed or printed name	Nadya Gordon		
Signature	<i>Nadya Gordon</i>	Date	June 30, 2005

Based on PTO/SB/21 (04-04) as modified by Blakely, Sokoloff, Taylor & Zafman (wtr) 06/04/2004.  
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

<b>FEE TRANSMITTAL</b> <b>for FY 2005</b> <small>Patent fees are subject to annual revision.</small>		Complete if Known	
		Application Number	09/715,676
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.		Filing Date	November 17, 2000
		First Named Inventor	Stephen Neushul
		Examiner Name	Heather D. Gibbs
TOTAL AMOUNT OF PAYMENT		(\$)	0.00
		Art Unit	2622
		Attorney Docket No.	60414P003

**METHOD OF PAYMENT (check all that apply)**

☐ Check 
 ☐ Credit card 
 ☐ Money Order 
 ☒ None 
 ☐ Other (please identify): \_\_\_\_\_

☒ Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below 
 ☐ Charge fee(s) indicated below, except for the filing fee  
☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20. 
 ☒ Credit any overpayments

**FEE CALCULATION**

**1. EXTRA CLAIM FEES**

Total Claims	Extra Claims	Fee from below	Fee Paid
15	20	0	\$0.00
2	3	0	\$0.00

Independent Claims: 2  
 Multiple Dependent: \_\_\_\_\_

Large Entity		Small Entity		Fee Description
Fee Code	Fee (\$)	Fee Code	Fee (\$)	
1202	50	2202	25	Claims in excess of 20
1201	200	2201	100	Independent claims in excess of 3
1203	350	2203	180	Multiple Dependent claim, if not paid
1204	300	2204	150	**Reissue independent claims over original patent
1205	300	2205	150	**Reissue claims in excess of 20 and over original patent
SUBTOTAL (1)				(\$) 0.00

\*or number previously paid, if greater, For Reissues, see below

**2. ADDITIONAL FEES**

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
2053	130	2053	130	Non-English specification	
1251	120	2251	60	Extension for reply within first month	
1252	450	2252	225	Extension for reply within second month	
1253	1,020	2253	510	Extension for reply within third month	
1254	1,590	2254	795	Extension for reply within fourth month	
1255	2,160	2255	1,080	Extension for reply within fifth month	
1401	500	2401	250	Notice of Appeal	
1402	500	2402	250	Filing a brief in support of an appeal	
1403	1,000	2403	500	Request for oral hearing	
1451	1,510	2451	1,510	Petition to institute a public use proceeding	
1450	130	2450	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17(g)	
1808	180	1808	180	Submission of Information Disclosure Stmt	
1809	750	1809	375	Filing a submission after final rejection (37 CFR § 1.129(e))	
1810	750	2810	375	For each additional invention to be examined (37 CFR § 1.129(b))	
Other fee (specify)					
SUBTOTAL (2)				(\$)	

SUBMITTED BY		Complete (if applicable)			
Name (Print/Type)	Thomas M. Coester	Registration No. (Attorney/Agent)	39,637	Telephone	(310) 207-3800
Signature	<i>Thomas Coester</i>	Date	06/30/05		

Based on PTO/SB/17 (12-04) as modified by Blakely, Sokoloff, Taylor & Zafman (wtr) 12/15/2004.  
 SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

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(\$) 0.00		Attorney Docket No.	60414P003

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 ☐ Charge fee(s) indicated below, except for the filing fee  
☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20. 
 ☒ Credit any overpayments

**FEE CALCULATION**

**1. EXTRA CLAIM FEES**

Total Claims	Extra Claims	Fee from below	Fee Paid
15	0	50.00	\$0.00
2	0	200.00	\$0.00

Independent Claims: 2  
 Multiple Dependent: 0

Large Entity		Small Entity		Fee Description
Fee Code	Fee (\$)	Fee Code	Fee (\$)	
1202	60	2202	25	Claims in excess of 20
1201	200	2201	100	Independent claims in excess of 3
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SUBTOTAL (1) (\$) 0.00

**2. ADDITIONAL FEES**

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1402	500	2402	250	Filing a brief in support of an appeal	
1403	1,000	2403	500	Request for oral hearing	
1451	1,510	2451	1,510	Petition to institute a public use proceeding	
1460	130	2460	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17(a)	
1806	180	1806	180	Submission of Information Disclosure Sheet	
1809	750	1809	255	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	750	2810	395	For each additional invention to be examined (37 CFR § 1.129(b))	

Other fee (specify): \_\_\_\_\_

SUBTOTAL (2) (\$) \_\_\_\_\_

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Name (Print/Type)	Thomas M. Coester	Registration No. (Attorney/Agent)	39,637
Signature	<i>Thomas Coester</i>	Telephone	(310) 207-3800
		Date	06/30/05

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**REPLY UNDER 37 CFR 1.116  
EXPEDITED PROCEDURE  
TECHNOLOGY CENTER**

**PATENT  
Attorney's Docket No. 60414P003**

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Application of:	) Examiner: Gibbs, Heather D.
Stephen Neushul	) Art Group: 2622
Application No. 09/715,676	)
Filed: November 17, 2000	)
For: <u>AUTOFEEDER FOR X-RAY SCANNING</u>	)

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Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**RESPONSE TO FINAL OFFICE ACTION**

In response to the Final Office Action mailed April 22, 2005, in connection with the above-referenced patent application, Applicant respectfully requests consideration of the attached remarks.